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## BIB DATA SHEET

CONFIRMATION NO. 4700

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|---|---|--|-------------------------------|---|---|---|
| <b>SERIAL NUMBER</b><br>09/778,474  | <b>FILING or 371(c) DATE</b><br>02/07/2001<br><b>RULE</b>   | <b>CLASS</b><br><del>455</del><br>370                    | <b>GROUP ART UNIT</b><br>2419 | <b>ATTORNEY DOCKET NO.</b><br>TAN-2-1495.01.US  |   |   |
| <b>APPLICANTS</b><br>G. Rodney Nelson, Merritt Island, FL;<br>John E. Hoffmann, Indialantic, FL;<br>Antoine J. Roupheal, Escondido, CA;<br>James A. Proctor JR., Indialantic, FL;<br>(yes) St<br><b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/180,598 02/07/2000<br>(none) ST<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>03/12/2001 |   |  |                               |   |   |   |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and /SABA TSEGAYE/<br>Acknowledged Examiner's Signature  |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>FL | <b>SHEETS DRAWINGS</b><br>8   | <b>TOTAL CLAIMS</b><br><del>29</del> 17 | <b>INDEPENDENT CLAIMS</b><br><del>0</del> 4 |
| <b>ADDRESS</b><br>VOLPE AND KOENIG, P.C.<br>DEPT. ICC<br>UNITED PLAZA, SUITE 1600<br>30 SOUTH 17TH STREET<br>PHILADELPHIA, PA 19103<br>UNITED STATES  |   |  |                               |   |   |   |
| <b>TITLE</b><br>MINIMAL MAINTENANCE LINK TO SUPPORT SYNCHRONIZATION   |   |  |                               |   |   |   |
| <b>FILING FEE RECEIVED</b><br>1212  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |   |